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**APPLICANTS**

Hiroyuki Takakura, Isehara, JAPAN;  
 Nobuyasu Yamaguchi, Machida, JAPAN;  
 Kenichiro Sakai, Sagamihara, JAPAN;  
 Hirotaka Chiba, Atsugi, JAPAN;  
 Tsugio Noda, Hadano, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 23	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

38834

**TITLE**

IMAGE PROCESSING METHOD AND IMAGE PROCESSING DEVICE

FILING FEE RECEIVED 1410	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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